



POLICE DEPARTMENT
LEGAL BUREAU
F.O.I.L. Unit, Room 110C
One Police Plaza
New York, NY 10038

Emily Crose
DEPT MR 61931
411A Highland Ave
Somerville, MA, 02144

December 3, 2018

FOIL Request #: FOIL-2018-056-10694
Your File #:

Dear Sir or Madam:

This letter is in response to your request received by this office on October 22, 2018 in which you requested access to certain records under the New York State Freedom of Information Law (FOIL).

The following captions, if checked, pertain to your request:

☐ Responsive to your request, the following document(s) have been accessed and photocopied:

☐ Redactions have been made to the document(s) in that the release of such information would represent an unwarranted invasion of person privacy {§87.2 (b)}.

☐ Redactions have been made to the document(s) in that the release of such information would endanger the life and safety of any person {§87.2 (f)}.

☐ Redactions have been made to the document(s) in that the release of such information would reveal non-routine investigative techniques {§87.2 (e)(iv)}.

☐ Redactions have been made to the document(s) in that the release of such information does not represent final agency determination {§87.2 (g)(iii)}.

☐ Redactions have been made to the document(s) in that the release of such information would identify confidential source/confidential information {§87.2 (e)(iii)}

☐ Based on the information you provided, this unit conducted a diligent search for the following requested document(s) which could not be found:

☒ For the following requested item(s), I must refer you to the appropriate agency/agencies or unit that may be in possession of such documents: **NYC Department of Records and Information Services: <https://www1.nyc.gov/site/records/about/contact.page>**

4 page(s) have been copied. Please remit payment in the amount of \$ 45 within thirty (30) days. Failure to do so will result in this file being CLOSED.

☐ The case folder contained records that did not directly pertain to the accident. Such records are not included in the enclosed CD/DVD-ROM.

☐ The requested documents are enclosed with this letter.

☐ Upon receipt of payment, the requested documents will be mailed.

PAYMENT PROCEDURE

Send check or money order (no cash) payable to the "New York City Police Department"

Mail payment to:

New York Police Department, F.O.I.L. Unit, Room 110C, One Police Plaza, New York, NY
10038

Note: Please include the FOIL number on the check or money order

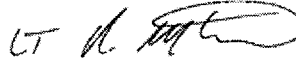
APPEAL PROCEDURE

Should you so desire, you may appeal this decision or any portion thereof. Such an appeal must be made in writing, within thirty (30) days of the date of this letter, and must be forwarded to:

Sergeant Jordan S. Mazur, Records Appeals Officer, New York City Police Department, One Police Plaza, Room 1406, New York, NY 10038

Pl or emailed to foilappeals@nypd.org please include copies of the FOIL request and this letter with your appeal.

Very truly yours,



Richard Mantellino

Lieutenant

New York City Police Department (NYPD)